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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of 08/389,712 02/15/1995 PAT 6,515,009
 which is a CIP of 08/011,669 01/28/1993 ABN
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**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	STATE OR COUNTRY WA	SHEETS DRAWING 19	TOTAL CLAIMS 101	INDEPENDENT CLAIMS 10
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TITLE
 THERAPEUTIC INHIBITOR OF VASCULAR SMOOTH MUSCLE CELLS

FILING FEE RECEIVED 2954	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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